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## BIB DATA SHEET

CONFIRMATION NO. 7590

<b>SERIAL NUMBER</b> 10/627,260	<b>FILING or 371(c) DATE</b> 07/24/2003 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3734	<b>ATTORNEY DOCKET NO.</b> S202-USA	
<b>APPLICANTS</b> Robert Greenberg, Los Angeles, CA; Da-Yu Chang, Rowland Heights, CA; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/399,012 07/26/2002 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 10/21/2003					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /CHRISTINA DANIELLE GETTMAN/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWINGS</b> 8	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> SECOND SIGHT MEDICAL PRODUCTS, INC. 12744 SAN FERNANDO ROAD BUILDING 3 SYLMAR, CA 91342 UNITED STATES					
<b>TITLE</b> Surgical tool for electrode implantation					
<b>FILING FEE RECEIVED</b> 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		